

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT

Docket Number
13425/1

Application Number
10/539,332

Filing Date
June 15, 2005

Examiner
To Be Assigned

Art Unit
To Be Assigned


Invention Title
DEVICE FOR SEPARATING BETWEEN THE
UPPER AND LOWER JAWS AND METHOD
USING THE SAME

Inventor(s)
Eran LAVI et al.

Commissioner for Patents
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1. In accordance with the duty of disclosure under 37 C.F.R. § 1.56 and in conformance with the procedures of 37 C.F.R. §§ 1.97 and 1.98 and M.P.E.P. § 609, attorneys for Applicants hereby bring the following references to the attention of the Examiner. The references are listed on the attached modified PTO form 1449. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the references be made of record therein and appear among the "References Cited" on any patent to issue therefrom.
2. A copy of each patent, publication or other information listed on the modified PTO form 1449 is enclosed, except as otherwise indicated on the modified PTO form 1449.

Dated: 5/1/06

By: 
Dervis Magistre (Reg. No. 41,172)

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INFORMATION DISCLOSURE STATEMENT BY APPLICANTS PTO FORM 1449	Atty. Docket No.	Serial No.
	13425/1	10/539,332
	Applicant(s)	
	Eran LAVI et al.	
	Filing Date	Group
	June 15, 2005	To Be Assigned

U. S. PATENT DOCUMENTS

EXAMINER'S INITIALS	PATENT NUMBER	PATENT DATE	NAME	CLASS	SUBCLASS	FILING DATE

FOREIGN PATENT DOCUMENTS

EXAMINER'S INITIALS	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUB-CLASS	TRANSLATION	
						YES	NO

OTHER DOCUMENTS

EXAMINER'S INITIALS		AUTHOR, TITLE, DATE, PERTINENT PAGES, ETC.
		Kazuya Yoshida, "Oral device therapy for the upper airway resistance syndrome patient," The Journal of Prosthetic Dentistry, Vol. 87, No. 4, April 2002, pp. 427-429

*Described in the Specification.

EXAMINER	DATE CONSIDERED
EXAMINER: Initial if citation considered, whether or not citation is in conformance with M.P.E.P. 609; draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.	